-5	
	Sta
	De

ate of Rhode Island epartment of State - Business Services Division

2025

५ अस्तुष्ट्र होता

Annual Report for the year: **Limited Liability Company**

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

001700437 3. NAICS Code 621330 5. State of Formation RI 6. Principal Office Address	Exact name of the Limite Carolina Ridge Constitution Brief description of the characteristic Counseling	• • •	n Rhode Island	
3. NAICS Code 621330 5. State of Formation RI 6. Principal Office Address	. Brief description of the ch		n Rhode Island	
621330 5. State of Formation RI 6. Principal Office Address		naracter of business conducted in	n Rhode Island	
5. State of Formation RI 6. Principal Office Address	Patient Counseling			
RI 3. Principal Office Address				
6. Principal Office Address				•
•				
		City	State	Zip
162 Dover Lane		Richmond	RI	02812
7 Mailing Address of Limited Liabil	ty Company and Name or	Title of Contact Person		
Contact Name Marie-Claire Co	rnillon	Contact Title Owner		
Street Address 162 Dover Lane		City Richmond	State RI	^{Zip} 02812
8. The Resident Agent information	currently of record with the	RI Department of State is accur	ate. Changes require	e filing Form 642.
9. Under penalty of perjury, I dec statements, and that all stateme			ing any accompany	ring schedules and
Name of Authorized Person		Date		
Marie-Claire Cornillon		1/22/25		

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov